

0511894

19CT 1948X

1472

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile		N					
Agency ORI Number FLO 502600		Agency Name PALM BEACH GARDENS POLICE DEPARTMENT				Agency Report Number (N.T.A.'s only) 78- 19006142											
Charge Type: Check as many as apply.		☐ 1. Felony ☐ 2. Traffic Felony		☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		Weapon Seized / Type 2 1. Yes 2. No		Multiple Clearance Indicator							
Location of Arrest (Including Name of Business) 3902 BURNS RD, PALM BEACH GARDENS, FL 33410						Location of Offense (Business Name, Address) BURNS ROAD/RIVERSIDE DRIVE, PALM BEACH GARDENS, FL 33410											
Date of Arrest 10/19/2019		Time of Arrest 22:37		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle 3902 BURNS RD, PALM BEACH GARDENS, FL 33410					
Name (Last, First, Middle) SMITH, MADELINE, NICOLE						Alias (Name, DOB, Soc. Sec. #, Etc.) MADELINE MONTGOMERY											
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex F		Date of Birth 10/23/1992		Height 506		Weight 150		Eye Color BRO		Hair Color BRO					
										Complexion LGT		Build SMALL					
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT: BUTT - HEART; SCAR - BACK						Marital Status SINGLE		Religion CHRISTIAN		Indication of Alcohol Influence Drug Influence		Y ☒ N ☐ Unk ☐					
Local Address (Street, Apt. Number) 102 1ST COURT, PALM BEACH GARDENS, FL 33410						(City) (678)		(State) 206-6135		(Zip)		Residence Type 1. City 3. Florida 2. County 4. Out of State					
Permanent Address (Street, Apt. Number) 102 1ST COURT, PALM BEACH GARDENS, FL 33410						(City)		(State)		(Zip)		Address Source SELF					
Business Address (Name, Street) ()						(City)		(State)		(Zip)		Occupation ()					
D/L Number, State 104685701 SC		Soc. Sec. Number ()		INS Number		Place of Birth (City, State) ATLANTA, GA		Citizenship USA									
Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth		☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile					
Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth		☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile					
Parent Legal Custodian Other						Name (Last) (First) (Middle)						Residence Phone ()					
Address (Street, Apt. Number) ()						(City) (State) (Zip)						Business Phone ()					
Notified by (Name)						Date		Time		Juvenile Disposition 1. Handled/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated		1					
Released To (Name)						Relationship						Date					
Time																	
The above address provided by ☐ defendant and / or ☐ defendant's parents. The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. ☐ Yes, by (Name) ☐ No (Reason)						School Attended						Grade					
Property Crime? ☐ Yes ☐ No						Description of Property						Value of Property					
Drug Activity N. N/A P. Possess						S. Sell B. Buy T. Traffic						R. Smuggle D. Deliver E. Use					
K. Dispense/ Distribute						M. Manufacture/ Produce/ Cultivate						Z. Other					
Drug Type N. N/A A. Amphetamine						B. Barbiturate C. Cocaine E. Heroin						H. Hallucinogen M. Marijuana C. Opium/Deriv.					
P. Paraphernalia/ Equipment S. Synthetics						U. Unknown Z. Other											
Charge Description DRIVING UNDER THE INFLUENCE						Counts 1		Domestic Violence ☐ Y ☒ N		Statute Violation Number 316.193(1)				Violation of ORD #			
Drug Activity N						Drug Type N		Amount / Unit N/A		Offense #		Warrant / Capias Number				Bond OR	
Charge Description						Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number				Violation of ORD #			
Drug Activity						Drug Type		Amount / Unit		Offense #		Warrant / Capias Number				Bond	
Charge Description						Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number				Violation of ORD #			
Drug Activity						Drug Type		Amount / Unit		Offense #		Warrant / Capias Number				Bond	
Charge Description						Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number				Violation of ORD #			
Drug Activity						Drug Type		Amount / Unit		Offense #		Warrant / Capias Number				Bond	
Charge Description						Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number				Violation of ORD #			
Drug Activity						Drug Type		Amount / Unit		Offense #		Warrant / Capias Number				Bond	
Location (Court Room Number, Address) NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700																	
Court Date and Time Month NOVEMBER Day 20 Year 2019 Time 10:00 AM ☒ PM																	
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED. 10/19/2019																	
Signature of Defendant/Juvenile and Parent /Custodian (Signature)														Date Signed			
HOLD for other Agency Name:						Signature of Arresting Officer (Signature)						Name Verification (Printed by Arrestee) ()					
☐ Dangerous ☐ Suicidal						☐ Resisted Arrest ☐ Other:						(PRINT) Off. Cameron Carver #471					
I.D. #						Pouch #						Transporting Officer Off. Cameron Carver #471					
I.D. #						Agency PBGPD						Witness here if subject signed with an "X"					

DISTRIBUTION: WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY

GOLD - DEFENDANT (N.T.A.'s ONLY)

OCT 20 2019

OCT 20 2019

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 19 DAY OF OCTOBER 20 19 AT 22:09 AM ☒ PM
SUBJECT: SMITH, MADELINE, NICOLE CASE NUMBER: 19006142

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Ofc. Cameron Carver #471

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

+PC for Stop: Officer Morea #517 was traveling northbound on N Military Trail when a blue Honda CR-V bearing South Carolina Tag NVE970 "blew past him." The Honda got in front of Morea and turned onto Burns Road. Morea conducted an NCIC check on the vehicle and observed the tag was expired.
+Manner of Stop: Honda pulled into 3902 Burns Road and parked in a parking spot.
+APC: Morea identified the driver and sole occupant via her South Carolina Driver's License as Madeline Nicole Smith.

OBSERVATION OF DRIVER:

+Appearance of Driver: Swaying, Unsteady; wearing a blue "Indiantown Rodeo" band on right arm.
+Eyes: Glassy, Watery, Bloodshot
+Exit Sequence: Unsteady getting out of vehicle.

DRIVER'S STATEMENTS:

+In Car/Roadsides: Drank at dinner, (between 17:30 and 18:00) ate Chicken Wrap, Sushi and Orange Cake. Claims to only drank one Truly Seltzer. Coming from Stuart where dinner was at then came from the Indiantown Rodeo.
+BAT: Advised she takes Prozac and Magnesium.
+Implied Consent Read: Asked what the consequence was, read Implied Consent and provided breath.

ODORS:

Odor of unknown alcoholic beverage.

GENERAL OBSERVATIONS

SPEECH: Pronounced and Slurred

ATTITUDE: Calm, Cooperative, Respectful, Friendly

CLOTHING: Blue Tank-top; Blue Jean Shorts; Brown Boots

MEDICAL/OTHER: Roadsides: None
BAT: Prozac, Magnesium

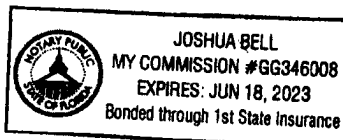
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 20 day of OCTOBER 20 19 by Ofc. Cameron Carver

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Personally Known

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



SCANNED
OCT 20 2019

SUBJECT: SMITH, MADELINE, NICOLE CASE NUMBER 19006142

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|---|
| ☒ LT EYE-LACK OF SMOOTH PURSUIT | ☒ RT EYE-LACK OF SMOOTH PURSUIT |
| ☒ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | ☒ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| ☒ LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | ☒ RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

Condition of Eyes: Glassy, Watery, Bloodshot
Observations: Vertical Gaze Nystagmus was present. Visible sway.

WALK & TURN:

- *Lost Balance
- *Missed Heel to Toe
- *Used Arms for Balance
- *Stopped While Performing Task

ONE LEG STAND:

- *Put Foot Down
- *Used Arms for Balance
- *Swayed

ROMBERG ALPHABET:

- *Swayed
- Observations: Apparent Odor of Unknown Alcohol

FINGER TO NOSE:

- *Swayed
- *Missed Finger to Nose

BREATH TEST RESULTS: .135 .137

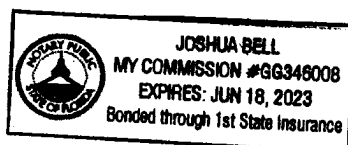
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 20 day of OCTOBER, 2019 by Ofc. Cameron Carver

(Print name of Arresting Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Personally Known

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



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OCT 20 2019

WITNESS LIST

CASE NUMBER: 19006142

ARRESTING OFFICER: Ofc. Cameron Carver

ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410

PHONE NUMBERS (HOME): N/A (WORK) (561) 799-4445

CAN TESTIFY TO: Facts of Case

NAME: Ofc. Dean Morea #517

ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410

PHONE NUMBERS (HOME) N/A (WORK) (561) 799-4445

CAN TESTIFY TO: Traffic Stop / Scene Safety

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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CAN TESTIFY TO: _____

NAME: _____

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PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

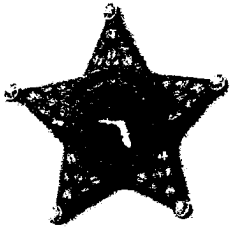
NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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OCT 20 2019



PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 19-128096 PBSO ZONE 3-13

AGENCY CASE # 19006142 CRASH CASE # _____

TIME OF STOP/CRASH 22:09 DATE 10/19/2019 DAY SATURDAY

SUBJECT'S NAME SMITH MADELINE NICOLE RACE W SEX F
LAST FIRST MID

HGT 506 WGT 150 DOB 10/23/1992

LOCATION 3902 BURNS RD, PALM BEACH GARDENS, FL 33410

ARRESTING OFFICER'S NAME & ID Ofc. Cameron Carver #471 AGENCY PBGPD

DIVISION: Traffic Unit

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 23:15

ARREST TIME 22:37

BREATH RESULTS:

.135

.137

N/A

N/A

TESTING OFFICER'S ID 7909

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OCT 20 2019

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006477 Software: 8100.27
Date of Test: 10/19/2019

Date of Last Agency Inspection: 10/18/2019

Observation Period Began: 23:15

Subject's Name: MADELINE N SMITH

DOB: 10/23/1992 Sex: F

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:	Test	g/210L	Time
	Diagnostics Check	OK	23:40
	Air Blank	0.000	23:41
	Control Test	0.081	23:41
	Air Blank	0.000	23:42
	Subject Sample #1	0.135	23:43
	Air Blank	0.000	23:43
	Air Blank	0.000	23:46
	Subject Sample #2	0.137	23:46
	Air Blank	0.000	23:46
	Control Test	0.080	23:47
	Air Blank	0.000	23:47
	Diagnostics Check	OK	23:47

Cylinder Lot: 17919080A1
Exp: 08/05/2021

State of Florida, County of Palm Beach

Personally appeared before me the undersigned authority, who (X) is personally known to me or () produced as identification, and who after being placed under oath, states:

I GARY J PARENT, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: Date: 10/19/19
Signature

Sworn to (or affirmed) before me this 19 day of September 2019

 OFF. C. CARVER
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2616, F.S.

TESTING FACILITY TASK REPORT

AGENCY: PBG 19006142

SUBJECT: SMITH, MADELINE N CASE NUMBER: 19-128096

DATE: 10/19/19 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 2337 ENDING TIME: 2349

BREATH TESTS RESULTS: 1) .135 TIME 2343 A.M./P.M. 2) .137 TIME 2346 A.M./P.M.

3) N/A TIME — A.M./P.M. 4) N/A TIME — A.M./P.M.

BREATH OPERATOR: G PARENT #7909

MAINTENANCE TECHNICIAN: KARLECK #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: PROUNOUNCED

ATTITUDE: CALM, TALKATIVE, FREQUENTLY, COOPERATIVE

CLOTHING: JEAN SHORTS, BUTT-DOWN JEAN TANK TOP, TAN CONRAD BOOTS

MEDICAL CONDITIONS: NONE

MEDICATIONS: PROPRAC, MAGNESIUM, 5HTT

OTHER: EYES GLASSY AND SLIGHTLY BLOOSY, ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE ON BREATH

COMMENTS: ARRIVED AT CENTER A/O BEGAN THE 30 MINUTE OBSERVATION PERIOD AT 2315 HRS.

A ASKED WHAT WERE HER OPTIONS TO TAKING TEST

A/O READ ILC

A STATED SHE UNDERSTOOD ILC AND AGREED TO TEST

A/O READ RIGHTS

A STATED SHE UNDERSTOOD RIGHTS

TECH. READ BREATH TEST RESULTS A STATED SHE UNDERSTOOD TEST RESULTS

A/O ATTEMPTED Q+A

A INVOKED HER RIGHT TO COUNSEL

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD -

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OCT 20 2019

SUBJECT: SMITH, MADEIRA M CASE NUMBER: 19006142

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

-OR-

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am Officer Cameron Carver of the Palm Beach Gardens PD.

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X) Read on Camera

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X) Read on Camera

SUBJECT: SMITH, MADELINE N. CASE NUMBER: 19006142

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE: EPILEPSY? _____
 GLASS EYE? _____
 FALSE TEETH? _____
 EAR INFECTION? _____
 INNER EAR TROUBLE? _____
 DIABETES? _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: OSC C. Carver #471 PB6AD **SCANNED**



**PALM BEACH COUNTY
SHERIFF'S OFFICE**
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
I/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
Other	☐	415.107 (1)	Other: Elderly Abuse	
	☐	119.0712 (2)	Other: Personal Information Contained in a Motor Vehicle Record	

REVIEW COMPLETED BY

Booking Number: 2019034096

Date: 10/20/2019

Specialist Name/ID: M. Tooks #8557

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OCT 20 2019